

HAWAII STATE ETHICS COMMISSION

DISCLOSURE OF FINANCIAL INTERESTS (LONG FORM)

NAME (Last, First, Middle) Inouye, Lorraine Rodero	STATE POSITION HELD: (Dept/Div or Board/Commission) State Senator TERM OF OFFICE (Begin/End): November 2004 / November 2008
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FOR EACH ITEM, EXCEPT ITEM 9, DISCLOSE INTERESTS OF FILER, SPOUSE, AND DEPENDENT CHILDREN.
 USE THE ABBREVIATIONS: "F" for filer, "SP" for spouse, "DC" for dependent children, and "JT" for joint interests of the spouse and filer.

ITEM 1: INCOME FOR SERVICES RENDERED FOR PRECEDING CALENDAR YEAR

List the source (the term "source" also includes any state or other government agencies) and amount of all income of \$1,000 or more received during the preceding calendar year, for services rendered, and the nature of the services rendered.

F,SP,DC,JT	NAME AND ADDRESS OF SOURCE OF INCOME	AMOUNT	SERVICES RENDERED
F	State of Hawaii State Capitol, Room 201 Honolulu, Hawaii 96813	D	State Senator
F	Aloha Blooms, Inc. 215 Paukaa Drive Hilo, Hawaii 96720	B	President and CEO
SP	Floral Resources/Hawaii, Inc. 175 E. Kawaiilani Street Hilo, Hawaii 96720	E	President and CEO
F	Social Security Administration	C	Social Security Income

☐ Check here if entry is None

☒ Check here if additional sheets are attached

ITEM 2: OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

List the amount and identity of every ownership or beneficial interest held during the disclosure period in any business in or outside of the State if the interest has a value of \$5,000 or more or is equal to 10% or more of the ownership of the business.

F,SP,DC,JT	BUSINESS NAME AND ADDRESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE OR NO. OF SHARES
SP	Inouye, Inc. 175 E. Kawaiilani Street Hilo, Hawaii 96720	Real Estate Development	20%	F
F	Aloha Blooms, Inc. 215 Paukaa Drive Hilo, Hawaii 96720	Tropical Flower Growing & Marketing	50%	500 shares
SP	Aloha Blooms, Inc. 215 Paukaa Drive Hilo, Hawaii 96720	Tropical Flower Growing & Marketing	50%	500 shares

☐ Check here if entry is None

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F,SP,DC,JT	NAME AND ADDRESS OF SOURCE OF INCOME	AMOUNT	SERVICES RENDERED
SP	AFK Subdivision Partners 175 E. Kawaiilani Street Hilo, Hawaii 96720	C	Real Estate Development

☐ Check here if entry is None

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F,SP,DC,JT	BUSINESS NAME AND ADDRESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE OR NO. OF SHARES
SP	Aina Hawaiian Tropical Products, LLC 175 E. Kawaiilani Street Hilo, Hawaii 96720	Internet Marketing	25%	200 shares

☐ Check here if entry is None

☐ Check here if additional sheets are attached

ITEM 3: TRANSFER OF OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

List any ownership or beneficial interests in businesses transferred during the disclosure period and the date of transfer.

F,SP, DC,JT	OWNERSHIP OR BENEFICIAL INTEREST TRANSFERRED DURING THIS DISCLOSURE PERIOD	DATE OF TRANSFER
	None	

☒ Check here if entry is None☐ Check here if additional sheets are attached**ITEM 4: CREDITORS**

List the name of each creditor to whom the value of \$3,000 or more was owed during the disclosure period and the original amount and amount outstanding. Exclude debts from retail installment transactions for the purchase of consumer goods.

F,SP, DC,JT	NAME OF CREDITOR	ORIGINAL AMOUNT OWED	AMOUNT OUTSTANDING
F&SP	First Hawaiian Bank (Hilo Residence) 1205 Kilauea Avenue Hilo, Hawaii 96720	G	G
F&SP	First Hawaiian Bank (HNL Condo)	F	F
F&SP	First Hawaiian Bank (Volcano Home)	E	E
F&SP	First Hawaiian Bank (Credit Line)	D	D

☐ Check here if entry is None☐ Check here if additional sheets are attached**ITEM 5: OFFICERSHIPS, DIRECTORSHIPS, TRUSTEESHIPS**

List every officership, directorship, trusteeship, or other fiduciary relationship held during the disclosure period in any business or organization, the term of office, and the annual compensation.

F,SP, DC,JT	NAME AND ADDRESS OF BUSINESS	TITLE HELD	TERM OF OFFICE	ANNUAL COMPENSATION
F&SP	Aloha Blooms, Inc. 215 Paukaa Drive Hilo, Hawaii 96720	Directors	Annual	None
F&SP	Ronald K. Jitchaku Trust c/o 215 Paukaa Drive Hilo, HI 96720	Trustees	Ongoing	None
SP	Floral Resources/Hawaii, Inc. 175 E. Kawaihani Street Hilo, Hawaii 96720	Director	Annual	None

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ITEM 3: TRANSFER OF OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

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F,SP, DC,JT	NAME OF CREDITOR	ORIGINAL AMOUNT OWED	AMOUNT OUTSTANDING

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ITEM 5: OFFICERSHIPS, DIRECTORSHIPS, TRUSTEESHIPS

List every officership, directorship, trusteeship, or other fiduciary relationship held during the disclosure period in any business or organization, the term of office, and the annual compensation.

F,SP, DC,JT	NAME AND ADDRESS OF BUSINESS	TITLE HELD	TERM OF OFFICE	ANNUAL COMPENSATION
SP	Aina Hawaiian Tropical Products, LLC 175 E. Kawaihani Street Hilo, Hawaii 96720	Managing Member	Annual	None

☐ Check here if entry is None ☐ Check here if additional sheets are attached

ITEM 6: INTERESTS IN REAL PROPERTY HELD, EXCLUDING PERSONAL RESIDENCE(S)

List interests in real property in or outside of the State held during the disclosure period, if the interest has a value of \$10,000 or more. Real property that is your personal residence or the personal residence of your spouse or dependent children need not be listed.

F,SP, DC,JT	STREET ADDRESS	TAX MAP KEY NUMBER (IF TAX MAP KEY NUMBER EXISTS)	VALUE
F	Keaau Ag Lots Subdivision (50% interest) Keaau, Hawaii 96749	(3) 1-7-027-173	G

☐ Check here if entry is None☐ Check here if additional sheets are attached**ITEM 7: INTERESTS IN REAL PROPERTY ACQUIRED, EXCLUDING PERSONAL RESIDENCE(S)**

List interests in real property in or outside of the State acquired during the disclosure period, if the interest has a value of \$10,000 or more. Real property that is your personal residence or the personal residence of your spouse or dependent children need not be listed.

F,SP, DC,JT	STREET ADDRESS AND TAX MAP KEY NUMBER (IF TAX MAP KEY NUMBER EXISTS)	AMOUNT & NATURE OF CONSIDERATION PAID	NAME OF PERSON RECEIVING THE CONSIDERATION
	None		

☒ Check here if entry is None☐ Check here if additional sheets are attached**ITEM 8: INTERESTS IN REAL PROPERTY TRANSFERRED, EXCLUDING PERSONAL RESIDENCE(S)**

List interests in real property in or outside of the State transferred during the disclosure period, if the interest has a value of \$10,000 or more. Real property that was your personal residence or the personal residence of your spouse or dependent children need not be listed.

F,SP, DC,JT	STREET ADDRESS AND TAX MAP KEY NUMBER (IF TAX MAP KEY NUMBER EXISTS)	AMOUNT & NATURE OF CONSIDERATION RECEIVED	NAME OF PERSON FURNISHING THE CONSIDERATION
	None		

☒ Check here if entry is None☐ Check here if additional sheets are attached

ITEM 9: CLIENTS PERSONALLY REPRESENTED BEFORE STATE AGENCIES

List the names of clients personally represented by you before state agencies, except in ministerial matters, for a fee or compensation during the disclosure period, excluding clients represented before courts.

NAME OF CLIENT	NAME OF STATE AGENCY
None	


☒ Check here if entry is None☐ Check here if additional sheets are attached**ITEM 10: CREDITOR INTERESTS IN INSOLVENT BUSINESSES**

List the amount and identity of every creditor interest in insolvent businesses, held during the disclosure period, if the interest has a value of \$5,000 or more.

F,SP,DC,JT	NAME AND ADDRESS OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE
	None		STATE OF HAWAII STATE ETHICS COMMISSION 06 APR 18 A9:50	

☒ Check here if entry is None☐ Check here if additional sheets are attached

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement to the best of my knowledge and belief. If I have a spouse and/or dependent children, I also hereby certify that I have included their interests on this form to the best of my knowledge and belief. I understand that it is a violation of State law, chapter 84, HRS, if information is not disclosed as required by chapter 84, HRS. I further understand that there are statutory penalties for noncompliance.


SIGNATURE

4-14-06
DATE